

Fw: T1308GHR016
Nobuko Hattori to: jpsych46
Cc: Michelle Parker

01/24/2013 09:36 AM

Hi John,

Attached is a letter with billing information and our order #T1308GHR016 authorizing 4 hours of "Workplace Violence Consultation". If you need additional information, please contact me.

Thank you,
Nobe Hattori
Region 8 Training Assistant
U.S. Environmental Protection Agency
1595 Wynkoop (8TMS-H)
Denver, CO 80202
Office (303) 312-6303
Fax (303) 312-6370

— Forwarded by Nobuko Hattori/R8/USEPA/US on 01/24/2013 09:37 AM —

From: Mail R8Printer/R8/USEPA/US@EPA
To: Nobuko Hattori/R8/USEPA/US@EPA
Date: 01/24/2013 09:26 AM
Subject: T1308GHR016

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 8
1595 Wynkoop
DENVER, CO 80202
<http://www.epa.gov/region08>

January 17, 2013

Nicoletti Flater and Associates
3595 South Teller Street, Suite 310
Lakewood, CO 80235

Enclosed is an Environmental Protection Agency training contract, which authorizes the following employee(s):

Michelle Parker

to attend: **Workplace Violence Consultation (4 Hours)**
on these date(s): **January 13 – September 30, 2013**

Please send your invoice to:

US Environmental Protection Agency
RTP-Finance Center
4930 Old Page Road (D143-02)
Research Triangle Park, NC 27709

Please reflect this tracking number on your invoice: **T1308GHR016**

To be certain that payment is not delayed, please be sure that the information on your invoice matches that in Block 1a of our training contract. You must include your federal TIN and the EPA employee's name on your invoice. As we are only authorized to make payments after services have been rendered, please mail your invoice after the completion of the event or course. If you have any questions or concerns, I can be reached at (303) 312-6418. It is a pleasure to do business with you.

Regards,

A handwritten signature in black ink, appearing to read "Karly Scholten".

Karly Scholten
Regional Training Officer

AUTHORIZATION, AGREEMENT AND CERTIFICATION OF TRAINING			A. Agency, code agency subelement and submitting office number EP00		B. Request Status (Mark (X) one) <input type="checkbox"/> Resubmission Correction <input checked="" type="checkbox"/> Initial Cancellation	
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1. Applicant Name (Last, First, Middle Initial) PARKER, MICHELLE E		2. Social Security Number/EHRI Employee Number XXX-XX-XXXX / 00031848		3. Date of Birth (yyyy-mm-dd) XXXX-XX-XX	
4. Home Address (Number, Street, City, State, ZIP Code) Parker, CO 80134		5. Home Telephone (including Area Code)		6. Position Level (Mark (X) one only) <input type="checkbox"/> a. Non-supervisory <input type="checkbox"/> c. Manager <input type="checkbox"/> b. Supervisory <input type="checkbox"/> d. Executive	
7. Organization Mailing Address (Branch/Division/Office/Bureau/Agency) U.S. EPA 1595 Wynkoop Street Denver, CO 802021129		8. Office Telephone (Include Area Code and Extension)		9. Work Email Address parker.michelle@epa.gov	
10. Position Title HR Specialist (Employee & Labo		11. Does applicant need special accommodation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please describe below.			
12. Type of Appointment 10		13. Education Level (Click link to view codes or go to page 7) 10		14. Pay Plan GS	
		15. Series 0201		16. Grade 13	
				17. Step 07	

1a. Name and Mailing Address of Training Vendor (No. Street, City, State, ZIP Code) Nicoletti Flater and Associates, 3595 South Teller Street, Suite 310, Lakewood CO 80239		1b. Location of Training Site (If same, mark box) <input type="checkbox"/>	
1c. Vendor Telephone Number 303-999-1617		1d. Vendor Email Address jpsych46@aol.com	
2a. Course Title Workplace Violence Consultation (4 hrs)		2b. Course Number Code N/A	
3. Training Start Date (Enter Date as yyyy-mm-dd) 2013-01-13		4. Training End Date (Enter Date as yyyy-mm-dd) 2013-09-30	
5. Training Duty Hours		6. Training Non-Duty Hours	
7. Training Purpose Type (Click link to view codes or go to page 9) 03		8. Training Type Code (Click link to view codes or go to page 9) 01	
9. Training Sub Type Code (Click link to view codes or go to page 9) 12		10. Training Delivery Type Code (Click link to view codes or go to page 12) 05	
11. Training Designation Type Code (Click link to view codes or go to page 13) 05		12. Training Credit 04	
13. Training Credit Type Code (Click link to view codes or go to page 13) 04		14. Training Accreditation Indicator Check Below <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
15. Continued Service Agreement Required Indicator (Check Below) <input type="checkbox"/> Yes <input type="checkbox"/> No		16. Continued Service Agreement Expiration Date (Enter date as yyyy-mm-dd)	
17. Training Source Type Code (Click link to view codes or go to page 13) 03		18. AGENCY USE ONLY 2013-01-11 12:01:26 PM	
19. Training Objective Assist management in evaluating workplace violence			

Section C - COST BILLING INFORMATION					
1. Direct Costs and Appropriation / Fund Chargeable			2. Indirect Costs and Appropriation / Fund Chargeable		
Item	Amount	Appropriation / Fund	Item	Amount	Appropriation / Fund
a. Tuition and Fees	\$ (b)(4)00	<i>See Below</i>	a. Travel	\$	
b. Books & Materials			b. Per diem		
c. TOTAL	\$ (b)(4)00		c. TOTAL	\$	
3. Total Training Non-Government Contribution Cost 800.00			6. BILLING INSTRUCTIONS (Furnish invoice to): US ENVIRONMENTAL PROTECTION AGENCY RTP-FINANCE CENTER 4930 OLD PAGE ROAD (D143-02) RESEARCH TRIANGLE PARK, NC 27709		
4. Document / Purchasing Order / Requisition Number T130864R016					
5. 8 Digit Station Symbol (Example - 12-34-5678) 68014922					

U.S. Office of Personnel Management

Page 1
NSN 7540-01-008-3801Standard Form 182
Revised December 2005
All previous editions not usable.

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(b)(4) 12

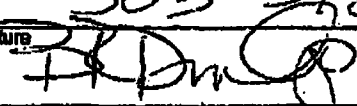

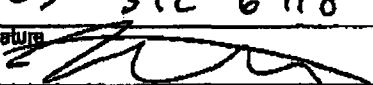
(b)(4) 12

ENTERED INTO IFMS

JAN 16 2013

Funds Certifying Official

T130864R016

STANDARD FORM 182	
1a. Immediate Supervisor - Name and title Dunlap, Bridget R. Supervisory Human Resource Spe	
1b. Area Code / Telephone Number 303 312-6106	1c. Email Address Dunlap.Bridget@epa.gov
1d. Signature 	1e. Date 1/14/2013
2a. Second-line Supervisor - Name and title Wong, Judith Asst Reg Admr/Tech & Mgmt Srvc	
2b. Area Code / Telephone Number	2c. Email Address wong.judith@epa.gov
2d. Signature 	2e. Date 1/14/2013
3a. Training Officer - Name and title Schoiten, Karolina M Human Resources Specialist	
3b. Area Code / Telephone Number 303-312-6418	3c. Email Address schoiten.karly@epa.gov
3d. Signature 	3e. Date 1/15/2013
SECTION 2 - AUTHORIZING OFFICER	
1a. Authorizing Officer - Name and title	
1b. Area Code / Telephone Number	1c. Email Address
1d. Signature	1e. Date
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
SECTION 3 - TRAINING FACILITY	
1a. Authorizing Officer - Name and title	
1b. Area Code / Telephone Number	1c. Email Address
1d. Signature	1e. Date
TRAINING FACILITY - Bills should be sent to the office indicated in Item C8. Please refer to the number given in Item C4 to assure prompt payment.	

Approval of Training - T1308GHR016
Nobuko Hattori to: Michelle Parker
Sent by: **Nobuko Hattori**

01/24/2013 09:40 AM

A copy of your approved SF-182 training agreement is attached.

This is to notify you that your training to attend:

Workplace Violence Consultation
January 13 - September 30, 2013

has been approved. The training request number assigned is T1308GHR016. To ensure that your registration was received by the vendor, please contact them to confirm your enrollment. It is imperative that you maintain a training file with all approved SF 182 forms as documentation of the training you have taken. Should you have any questions, please contact Karly Scholten at 312-6418.



Regards,

T1308GHR016,Parker,Michelle.pdf

Karly Scholten
Human Resources Training Officer

AUTHORIZATION, AGREEMENT AND CERTIFICATION OF TRAINING

A. Agency, code agency/subagency
and submitting office number
EP-00

B. Request Status (Initial (P) one)
☐ Resubmission
☐ Correction
☒ Initial
☐ Cancellation

1. Applicant Name (Last, First, Middle Initial)

PARKER, MICHELLE E

2. Social Security Number (SHR) Employee Number

XXX-XX-XXXX / 000031848

3. Date of Birth (YYYY-MM-DD)

XXXX-XX-XX

4. Home Address (Number, Street, City, State, ZIP Code)

Parker, CO 80134

5. Home Telephone
(including Area Code)

6. Position Level (Item P) one only

7. Training Level (Item P) one only

7. Organization Mailing Address (Branch-Division/Office/Bureau/Agency)

U.S. EPA

8. Office Telephone
(include Area Code and Extension)

9. Work Email Address

1595 Wyntonop Street, Denver, CO 80202-1129

Parker, Michelle@epa.gov

10. Position Title

HR Specialist (Employee & Labor)

11. Does applicant need special accommodations?
☐ Yes ☒ No

12. Type of Appointment
(Click link to view codes or go to page 7)

10

14. Pay Plan

GS

10. Series

0201

16. Grade

13

17. Step

07

1a. Name and Mailing Address of Training Vendor (No. Street, City, State, ZIP Code)

Nichols Paster and Associates, 2180 South Teiler Street, Suite 210, Lakewood CO 80215

1b. Location of Training Site (if same, mark box) ☐

EPA Region 8, 1595 Wyntonop Street, Denver CO 80202

1c. Vendor Telephone Number

303-988-1817

1d. Vendor Email Address

psvncld@epa.gov

2a. Course Title
Workplace Violence
Consultation (4 hrs)

N/A

3. Training Start Date (Enter Date as YYYY-MM-DD)

2013-01-13

4. Training End Date (Enter Date as YYYY-MM-DD)

2013-09-30

5. Training Day Hours

7. Training Purpose Type
(Click link to view codes or go to page 9)

03

8. Training Type Code
(Click link to view codes or go to page 9)

01

9. Training Sub Type Code
(Click link to view codes or go to page 9)

12

10. Training Delivery Type Code
(Click link to view codes or go to page 12)

05

11. Training Designation Type Code
(Click link to view codes or go to page 13)

05

12. Training Credit
(Click link to view codes or go to page 13)

04

14. Training Accreditation Indicator
Check Below

☐ Yes ☒ No N/A

15. Continued Service Agreement
Required Indicator (Check Below)

☐ Yes ☒ No

16. Continued Service Agreement Expiration Date
(Enter date as YYYY-MM-DD)

03

17. Training Source Type Code
(Click link to view codes or go to page 13)

03

18. Training Objective
Assist management in evaluating workplace violence

19. AGENCY USE ONLY
2013-01-11 12:01:28 PM

1. Direct Costs and Appropriation / Fund Changeable

Item Amount Appropriation / Fund

a. Tuition and Fees \$ 00

b. Books & Materials

c. TOTAL \$ 00

3. Total Training Non-Government Contribution Cost

00

4. Document / Purchasing Order / Requisition Number

TI308GHC016

5. a Digit Station Symbol (Example - 13-34-5879)

68014922

6. BILLING INSTRUCTIONS (Furnish invoice to):

US ENVIRONMENTAL PROTECTION AGENCY

RTP-FINANCE CENTER

4930 OLD PAGE ROAD (D143-02)

RESEARCH TRIANGLE PARK, NC 27709

U.S. Office of Personnel Management

NSN 7540-01-004-5901

Page 1

Standard Form 182
Revised December 2006
All previous editions not usable.




2013 T 086I000 2226F2 2501

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Funds Certifying Official

TI308GHC016

1a. Immediate Supervisor - Name and title Dunlap, Bridget R. Supervisory Human Resource Spe	
1b. Area Code / Telephone Number 303 342-6106	1c. Email Address Dunlap.Bridget@epa.gov
1d. Signature 	1e. Date 1/14/2013
2a. Second-line Supervisor - Name and title Wong, Judith Asst Reg Admr/Tech & Mgmt Srvc	
2b. Area Code / Telephone Number	2c. Email Address wong.judith@epa.gov
2d. Signature 	2e. Date 1/14/2013
3a. Training Officer - Name and title Scholten, Karolina M Human Resources Specialist	
3b. Area Code / Telephone Number 303-312-6418	3c. Email Address scholten.karly@epa.gov
3d. Signature 	3e. Date 1/15/2013
4a. Authorizing Officer - Name and title	
4b. Area Code / Telephone Number	4c. Email Address
4d. Signature	4e. Date
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
5a. Authorizing Officer - Name and title	
5b. Area Code / Telephone Number	5c. Email Address
5d. Signature	5e. Date

TRAINING FACILITY - Bills should be sent to the office indicated in item C6. Please refer to the number given in item C4 to assure prompt payment.



Document Review

Compass Document: RQ 1308GHR016

01/16/13

Document Summary:

Doc Type: RQ

Doc No: 1308GHR016

External Doc No:

Commitment Date: 01/16/13

Closed Date:

Servicing Finance Office: 08

Original Amount: \$(b)(4) 00

Available Amount: \$(b)(4) 00

Description: Workplace Violence Consult Hours (4) - Parker

Extended Description:

Workplace Violence Consult Hours (4) - Parker

Document Details: **Extended**

Line#	Line Amt	Obligated Amt	Refunded Amt	Available Amt	BFY	Fund	Org	Program	Project	FOC	CostOrg	Comments	Extended Description
1	\$(b)(4) 00	\$0.00		\$(b)(4) 00	2013	T	08G1000	ZZZGF2	0800BM00	2501			
2	\$(b)(4) 00	\$0.00		\$(b)(4) 00	20132014	B	08G1000	ZZZGF2	n/a	2501			

Document Activity:

Warehouse HomepageEPA@Work Home | EPA Internethttp://V1742TRTAY003.ea.ad.epa.gov/neis/ifms_doc.resolve

This web page was last updated on 11/08/2012.

For issues, please contact: EPA Call Center - (866) 411-4372

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JAN 16 2013

[Signature]

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